

Parent's Name (if Dependent) (print)

Office of Student Financial Aid

T.H. Harris Annex Bldg. 139A P.O. Box 9961 Baton Rouge, Louisiana 70813-9961 (225) 771-2790 fax: (225) 771-5898

2016-2017 Child Support Paid Verification Form

www.subr.edu

Student N	2016 -	-2017 Child Support Paid	pport Paid Verification CWID		
Indepe	endent Student:				
1. Y	You reported on your 2016-2017 FAFSA that you and/or your spouse paid Child Support in year 2015. If so, please complete the following:				
_	the child support, the na support was paid, and t the school, I will provice	my spouse paid child support in 2015. I me of the individual to whom the child support the total annual amount of child support the documentation of the payment of child name and Student ID No. at the top.	upport was paid, the names of the c that was actually paid in 2015 for	hildren for whom child each child. If asked by	
	Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid and age	Amount of Child Support Paid in 2015	
	Marty Jones	Chris Smith (example)	Terry Jones 15 yrs. old	\$6,000.00	
	child support was paid, school, your parent mu	ne name of the individual to whom the chand the total annual amount of child supst provide documentation of the payment des your name and Student ID No. at the Name of Person to Whom Child Support was Paid	oport that was paid in 2015 for each t of child support. <i>If additional specifical appears and a specific additional specific appears and a specific appears and</i>	h child. If asked by the ace is needed, attach a Amount of Child Support Paid in	
- 1	Marty Jones	Chris Smith (example)	Terry Jones 15 yrs. old	2015 \$6,000.00	
such as: A sign Copies Copies	ned statement from the individual s of the child support payment che of separation agreements and dive	information regarding child support paid receiving the child support certifying th necks, money order receipts, or similar re orce decrees are no longer acceptable for ver aid, rather than the amounts actually paid.	e amount of child support received cords of electronic payments havir	; or ng been made.	
Signatures:	This form must be signed by t	he student (if independent) or by the s	tudent and at least one parent (if	dependent).	
		Il the information reported to qualify for Financial aid may request additional info			
Student's Name (print) Signature		Signature	Date		
Spouse's Name (if married) - Optional		Signature			

Signature